OART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE Fee Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

CURRENT CORRESPONI		lock 1 for any change of address)	No Fee pap hav	e: A certificate of (s) Transmittal, Thi ers. Each additiona e its own certificate	mailing can only be used for a certificate cannot be used a paper, such as an assignment of mailing or transmission.	or domestic mailings of the for any other accompanying the companying the formal drawing, must be formal drawing, must be formal drawing.	
BRINKS, HOFER, GILSON & LIONE P.O. BOX 1340 MORRISVILLE, NC 27560				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
						(Depositor's name)	
	,	·				(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/574,257	03/30/2006		Adrien Gasse BLE RESISTORS, AND 1		13777-49	9742	
			,				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	11/25/2009	
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
LEE, KY 1. Change of corresponde		2833	338-215000				
"Fee Address" indi PTO/SB/47; Rev 03-0. Number is required. 3. ASSIGNEE NAME AN PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG	ess an assignee is identifing 17 CFR 3.11. Complete NEE	Indication form d. Use of a Customer TO BE PRINTED ON T	(B) RESIDENCE: (CITY	e) tent. If an assigne ssignment.	e is identified below, the d	ocument has been filed fo	
Commissariat a L'Energie Atomique			Paris, France				
		4b	Payment of Fee(s): (Please A check is enclosed. Payment by credit care	se first reapply an	poration or other private gray previously paid issue fee is attached. the the required fee(s), any decrease a center of the cen	shown above) .	
5. Change in Entity Statu	se (from status indicated		overpayment, to Depos	it Account Number	23-1925 (enclose a	n extra copy of this form).	
a. Applicant claims	SMALL ENTITY status Publication Fee (if requi	See 37 CFR 1.27,	from anyone other than th		L ENTITY status. See 37 Clered attorney or agent; or the		
Authorized Signature _	allys B.	Custo	Office.	Date/	1118709		
Typed or printed name	Allyn B. Rhodes			Registration No	56,745		
,					e public which is to file (and inutes to complete, includin ments on the amount of tir rademark Office, U.S. Depa SEND TO: Commissioner		
nder the raperwork Kedu	cuon Act of 1995, no pe	sons are required to resp	ond to a collection of info	mation unless it di	splays a valid OMB control	number.	
TOY 95 (Per 09/07) Amer	proved for use through 0	8/31/2010	OMB 0651-0033 U.	E Dotant and Trade	emark Office; U.S. DEPAR		